

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. 10666122  
APPLICANT(S)

FILING DATE 09-19-03

**CLAIMS**

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
10		1				
11		1				
12		1				
13		1				
14		1				
15		1				
16		1				
17		14				
18		12				
19		12				
20		14				
21	1					
22		0				
23	1					
24		1				
25		1				
26		1				
27		0				
28	1					
29		1				
30		0				
31						
32						
33						
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44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	78					
TOTAL CLAIMS	82					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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TOTAL DEP.						
TOTAL CLAIMS						